

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 720604 RECEIPT DATE: 12 / 26 / 00  
IA NUMBER: PCT/ AU99 / 00514 IA FILING DATE: 06 / 25 / 99  
FAMILY NAME: ANDERSON DELAY WAIVED (Y/N): Y  
GIVEN NAME: IAN DEMAND RECEIVED (Y/N): Y  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 06 / 29 / 98  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 11932/1 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
FAX  
NAME: KENYON & KENYON  
STREET: ONE BROADWAY  
CITY: NEW YORK  
STATE/COUNTRY: NY ZIP: 10004  
EMAIL:  
APPLICATION TITLES:  
PLUG AND GLAND ASEPTIC PACKAGE SYSTEM

TAB TO LAST POSITION,PUSH SEND